| Case 16-33046 Doc 1 Fill in this information to identify your case: | Filed 10/17/16 | Entered 10/17/16 15:01:37 | Desc Main |
|---|---|--|--|
| United States Bankruptcy Court for the: Northern District of Illinois Case number (If known): | Chapter you are filing Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ONITED STATE NORTHERN [OCT | LED S BANKRUPTCY COURT DISTRICT OF ILLINOIS 17 2016 LSTEADT GLEBK |
| | - Siapor 13 | And the state of t | amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| P | art 1: Identify Yourself | | |
|-----------|--|------------------------------|---|
| 1. | Your full name | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| | Write the name that is on your government-issued picture | Akilah | |
| | identification (for example, your driver's license or passport). | First name Renee | First name |
| | Bring your picture | Middle name Saunders | Middle name |
| | identification to your meeting with the trustee. | Last name | Last name |
| | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 | None | |
| | years | First name | First name |
| | Include your married or maiden names. | Middle name | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 1576/Beck | | | |
| 1 | number or federal | xxx - xx - <u>8 4 2 8</u> OR | XXX — XX — |
| ļ | Individual Taxpayer Identification number (ITIN) | 9 xx - xx | 9 xx - xx |

Akilah

First Name

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Debtor 1

Renee

Document Saunders

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| | About Debtor 1: | About Dehtor 2 (Spanson Cally) |
|--|---|--|
| | | About Debtor 2 (Spouse Only in a Joint Case) |
| Any business names and Employer Identification Numbers (EIN) you have used in | ☑ I have not used any business names or EINs. | ☐ I have not used any business names or EINs. |
| the last 8 years | Business name | 444 |
| Include trade names and | | Business name |
| doing business as names | Business name | |
| | | Business name |
| | | |
| | EIN | EIN — — — — — — — |
| | | |
| | EIN | EIN — -—————— |
| E Challes (1986) Marie Carlos Car | | |
| | | |
| Where you live | | If Debtor 2 lives at a different address: |
| | | and the decire accides. |
| | 12510 South Lincoln Street | |
| | Number Street | Number Street |
| | | |
| | | |
| | Columnat Data | |
| | Calumet Park IL 60827 City State ZIP Code | |
| | State ZIP Code | City State ZIP Cod |
| | Cook | |
| | County | County |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | 9131 South Blackstone | |
| | Number Street | Number Street |
| | | 5.000. |
| | P.O. Box | P.O. Box |
| | Chicago II 60619 | |
| | Crity State ZIP Code | City State 7/D Co |
| rid Life on the Collection for the England of the Collection of th | | State ZIP Code |
| Vhy you are choosing his district to file for | Check one: | |
| ankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | i have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | |
| | | |
| | | · · · · · · · · · · · · · · · · · · · |
| | | |

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Debtor 1

Akilah First Name

Renee Middle Name

Saunders

| 7. The chapter of the Bankruptcy Code you | Checi for Ba | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | |
|--|---------------------------|---|--|---|--|--|--|
| are choosing to file under | ☑ C | hapter 7 | | , 0 = == title top 01 | page 1 and check | the appropriate box. | |
| | ☐ ci | napter 1 | 1 | | | | |
| | Q CI | napter 1 | 2 | | | | |
| Mediginaria XX () was fix of profess and suppressed a summarican profess and suppressed from the suppressed of the supp | ☐ Cr | napter 1: | 3 | | | | |
| . How you will pay the fee | loc you sul | urself, ye bmitting | ou may pay with | cash cashior's | chook ar man- | heck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is pay with a credit card or check | |
| | ☐ I ne Api | eed to p | ay the fee in ins | italiments. If yo | ou choose this c | option, sign and attach the ents (Official Form 103A). | |
| | i re By less pay | quest the law, a just than 1: | hat my fee be wanted adge may, but is not some some some some some some some some | aived (You may not required to, I poverty line th | y request this op waive your fee, nat applies to you | ntion only if you are filing for Chapter 7 and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition. | |
| Have you filed for | ☑ No | | | | | - | |
| bankruptcy within the last 8 years? | Yes. | District | | When | | Case number | |
| | | | | | MM / DD / YYYY | | |
| | | 04 | | When | | | |
| | | | | | MM / DD / YYYY | Case number | |
| · | | District | | When | MM / DD / YYYY | | |
| Are any bankruptcy | V No | | | | | Case number | |
| cases pending or being filed by a spouse who is | ☑ No ☐ Yes. | District | | When | MM / DD / YYYY | Case number | |
| cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | | District | | WhenWhen | MM / DD / YYYY | Case number | |
| cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | Yes. | District Debtor District | | When | MM / DD / YYYY | Case number Relationship to you Case number, if known | |
| cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an | ☐ Yes. | Debtor | | When | MM / DD / YYYY | | |
| Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Yes. | Debtor _ Debtor _ District _ Debtor _ District _ | e 12. | When | MM / DD / YYYY MM / DD / YYYY | Relationship to you Case number, if known | |
| cases pending or being iled by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Yes. Yes. | Debtor _ District _ District _ Go to line Has your | e 12. | When | MM / DD / YYYY MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known | |

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Debtor 1

Akilah First Name

Renee Middle Name

Saunders Last Name

| 12. Are you a sole propriet | ✓ No. Go to Part 4. | | | | |
|--|--|---|--|--|--|
| of any full- or part-time business? | — 110: Go to Fait 4. | | | | |
| A sole proprietorship is a | Yes. Name and location of business | • | | | |
| individual, and is not a | Name of business, if any | | | | |
| separate legal entity such as a corporation, partnership, o | о обощева, и апу | - any | | | |
| LLC. | Number Street | | | | |
| If you have more than one sole proprietorship, use a | | | | | |
| separate sheet and attach it to this petition. | | | | | |
| to this petition. | City | | | | |
| | | CIP Code | | | |
| | Check the appropriate box to describe your business: | | | | |
| | Health Care Business (as defined in 11 U.S.C. § 101/274)) | | | | |
| | ☐ Single Asset Real Estate (as defined in 11 U.S.C. & 101/51P) | | | | |
| | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | |
| | Commodity Broker (as defined in 11 U.S.C. § 101/6)) | | | | |
| | None of the above | | | | |
| Chapter 11 of the Bankruptcy Code and are you a small business debtor? | If you are filing under Chapter 11, the court must know whether you are a small can set appropriate deadlines. If you indicate that you are a small business definest recent balance sheet, statement of operations, cash-flow statement, and any of these documents do not exist, follow the procedure in 11 U.S.C. § 11160 | otor, you must attach your iederal income tax return or if 1)(B). | | | |
| For a definition of small business debtor, see | No. I am not filing under Chapter 11. | | | | |
| 11 U.S.C. § 101(51D). | No. I am filing under Chapter 11, but I am NOT a small business debtor act the Bankruptcy Code. | cording to the definition in | | | |
| | Yes. I am filing under Chapter 11 and I am a small business debtor accordin Bankruptcy Code. | g to the definition in the | | | |
| 4: Report if You Own o | | | | | |
| | Have Any Hazardous Property or Any Property That Needs Imme | diate Attention | | | |
| o you own or have any | ⊉ No | | | | |
| roperty that poses or is leged to pose a threat | Yes. What is the hazard? | | | | |
| f imminent and entifiable hazard to | The die fielding | | | | |
| ublic health or safety? | | | | | |
| r do you own any operty that needs | | | | | |
| mediate attention? | If immediate attention is needed, why is it needed? | | | | |
| r example, do you own rishable goods, or livestock t must be fed, or a building t needs urgent repairs? | | | | | |
| | Where is the property? | | | | |
| | Number Street | | | | |
| | | | | | |
| | | | | | |
| | City | ate ZIP Code | | | |
| Form 101 | Si | ate ZIP Code | | | |

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Debtor 1

Akilah

Renee

Document <u>Saunders</u>

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Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether vou have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing credit counseling because of: | about |
|---|-------|
| | |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 dayş.

| | I am not required to receive a briefing credit counseling because of: | about |
|--|--|-------|
|--|--|-------|

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-33046 Doc 1 Filed 10/17/16

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Debtor 1

Akilah First Name Renee Saunders Last Name

| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☑ No. Go to line 16b. ☑ Yes. Go to line 17. | | | | | |
|---|---|---|---|--|--|--|
| | 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. | | | | | |
| | 16c. State the type of debts yo | u owe that are not consumer debts or b | usiness debts. | | | |
| 7. Are you filing under Chapter 7? | ☐ No. I am not filing under C | | and the second second and active register at the large received a defense of the large and the large and the large at the | | | |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | administrative expense No | ter 7. Do you estimate that after any exe es are paid that funds will be available to | empt property is excluded and or distribute to unsecured creditors? | | | |
| . How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | | |
| How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| How much do you estimate your liabilities to be? | ■ \$0-\$50,000 ■ \$50,001-\$100,000 ■ \$100,001-\$500,000 ■ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| | I have examined this petition, and correct. | I I declare under penalty of perjury that | the information provided is true and | | | |
| | If I have chosen to file under Cha | Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 s. I understand the relief available under each chapter, and I choose to proceed | | | | |
| | | | not pay or agree to pay someone who is not an attorney to help me fill out ad the notice required by 11 U.S.C. § 342(b). | | | |
| , \ | i universiano makino a falso stator | the chapter of title 11, United States Coment, concealing property, or obtaining rin fines up to \$250,000, or imprisonment 3571. | | | | |
| | × | * | | | | |
| | Signature of Debtor 1 Executed on 10 14 20 | Signature of Executed of | | | | |

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Debtor 1

Akilah First Name

Renee

Saunders

Desc Main

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

| | that any state exemption laws th | at apply. |
|--|--|---|
| ! <u>.</u> | Are you aware that filing for bankruptcy is a consequences? | serious action with long-term financial and legal |
| | ☐ No | |
| | ☑ Yes | |
| | Are you aware that bankruptcy fraud is a ser inaccurate or incomplete, you could be fined | ious crime and that if your bankruptcy forms are |
| • | □ No | or unprisoned? |
| | ☑ Yes | |
| • | Did you pay or agree to pay someone who is | not an attorney to help you fill out your bankruptcy forms? |
| : | | to help you fill out your bankruptcy forms? |
| | Yes. Name of PersonVeronic | a Eason |
| • | Attach Bankruptcy Petition Preparer's N | lotice, Declaration, and Signature (Official Form 119). |
| 1 | | 5 (2000at 10th 113). |
| | By signing here, I acknowledge that I understand the have read and understood this notice, and I at a start to the start of the start o | and the risks involved in filing without an attorney. I m aware that filing a bankruptcy case without an |
| | attorney may cause me to lose my rights or pr | operty if I do not properly handle the case |
| | * | * |
| | Signature of Debtor 1 | |
| : | 10 41 2411 | Signature of Debtor 2 |
| : | Date <u>/ U / 4 20) (</u> | Date |
| : | | MM / DD / YYYY |
| : | Contact phone | Contact phone |
| | Cell phone (773) 664-9097 | Cell phone |
| S. Dining A. Margin Company of the C | Email address KINSaunders Qual | 160 CON Email address |
| | | |
| Official Form 101 | Volunta - Bussella | |

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| Fill in this information to identify your case: | | | | |
|---|----------------------|------------------------------|-----------------------|-------------|
| Debtor 1 | Akilah First Name | Renee | Saunders Last Name | |
| Debtor 2 (Spouse, if filing) | First Nama | Middle Name | Last Name | |
| | | or the: Northern District of | | |
| Case number | | | PANANANANANA | |
| | (if known) | ···· | | |

| ie as complete and accurate as possible. If two married people are filing together, both are equally responsible for nformation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende our original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | |
|---|--------------------------------------|
| art 1: Summarize Your Assets | |
| | Your assets Value of what you own |
| . Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ |
| 1ь. Copy line 62, Total personal property, from Schedule A/B | \$3,500.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$3,500.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$8 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | 4 \$ 46,868.00 |
| Your total liabilities | \$46,868.00 |
| art 3: Summarize Your Income and Expenses | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,125.00 |
| | s 1,148.00 |

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Saunde Bocument

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Debtor 1

| Part 4: Answer These Questions for Administrative and Statist | tical Records |
|---|--|
| 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box as Yes | nd submit this form to the court with your other schedules. |
| 7. What kind of debt do you have? | |
| Your debts are primarily consumer debts. Consumer debts are those family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for s Your debts are not primarily consumer debts. You have nothing to repthis form to the court with your other schedules. | redistreal purposes. 26 U.S.C. § 159. |
| 8. From the Statement of Your Current Monthly Income: Copy your total current 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | Signature of the state of the s |
| 9. Copy the following special categories of claims from Part 4, line 6 of <i>Sch</i> | edule E/F: |
| | Total claim |
| From Part 4 on Schedule E/F, copy the following: | en de la company de la com La company de la company de |
| 9a. Domestic support obligations (Copy line 6a.) | \$ 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6d | c.) \$0.00 |
| 9d. Student loans. (Copy line 6f.) | • 16 932 00 |

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. **Total.** Add lines 9a through 9f.

16,932.00

0.00

0.00

16,932.00

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| Debtor 1 | Akilah | Renee | Saunders |
|---------------------|--------------------|---------------------------|-------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States I | Bankruptcy Court f | or the: Northern District | of Illinois |

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| es. Where is the property? | What is the property? Check all that apply. Gingle-family home | Do not deduct secured of | laims or exemptions, Put |
|---|--|--|---|
| 0. | Duplex or multi-unit building | Creditors Who Have Cla | ed claims on Schedule D: ims Secured by Property. |
| Street address, if available, or other description | Condominium or cooperative Manufactured or mobile home | | Current value of the portion you own? |
| | − □ Land | \$ 0.00 | s 0.00 |
| | Investment property | *************************************** | Ψ |
| City State ZIP Code | Timeshare Other | Describe the nature interest (such as fee the entireties, or a life | simple, tenancy by |
| | Who has an interest in the property? Check one | | o ostatoj, ii kilowii. |
| | Debtor 1 only | | |
| County | Debtor 2 only | | |
| · | Debtor 1 and Debtor 2 only | Check if this is co | mmunity property |
| | At least one of the debtors and another | (see instructions) | |
| | | | |
| | Other information you wish to add about this i property identification number: | tem, such as local | |
| own or have more than one, list here: | Other information you wish to add about this i property identification number: | tem, such as local | |
| own or have more than one, list here: | property identification number: | | aims or exemptions. Put |
| own or have more than one, list here: | what is the property? Check all that apply. Single-family home | Do not deduct secured cla | d claims on Schedule D: |
| own or have more than one, list here: Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building | Do not deduct secured cla | d claims on Schedule D: |
| | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative | Do not deduct secured did the amount of any secure Creditors Who Have Clair Current value of the | d claims on Schedule D: ns Secured by Property. Current value of the |
| | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Do not deduct secured dit the amount of any secure Creditors Who Have Clair Current value of the entire property? | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? |
| | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured did the amount of any secure Creditors Who Have Clair Current value of the | d claims on Schedule D: ns Secured by Property. Current value of the |
| | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | Do not deduct secured did the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 0.00 | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ 0.00 |
| Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Describe the nature of interest (such as fee secured in the content of the content o | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 0.00 of your ownership simple, tenancy by |
| Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 0.00 Describe the nature of the entire of the entire property? | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 0.00 of your ownership simple, tenancy by |
| Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an Interest in the property? Check one. | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Describe the nature of interest (such as fee secured in the content of the content o | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 0.00 of your ownership simple, tenancy by |
| Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an Interest in the property? Check one. | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Describe the nature of interest (such as fee secured) | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 0.00 of your ownership simple, tenancy by |
| Street address, if available, or other description | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Describe the nature of interest (such as fee secured) | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 0.00 of your ownership simple, tenancy by |
| City State ZIP Code | what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an Interest in the property? Check one. | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Describe the nature of interest (such as fee secured) | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 0.00 of your ownership simple, tenancy by e estate), if known. |

Document Page 11 of 56 Akilah Renee Debtor 1 Saunders Case number (# known) First Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home 0.00 Land 0.00 Investment property City ☐ Timeshare State ZIP Code Describe the nature of your ownership interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. 0.00 Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Yes Land Rover Who has an interest in the property? Check one. Make: 3.1. Do not deduct secured claims or exemptions. Put Discovery the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2002 Year: Debtor 1 and Debtor 2 only Current value of the Current value of the 198000 Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: 1,000.00 Check if this is community property (see 1,000.00 instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Make: 3.2. Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: At least one of the debtors and another entire property? portion you own? Other information: 0.000.00 Check if this is community property (see instructions)

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Case 16-33046 Doc 1 Filed 10/17/16 Entered 10/17/16 15:01:37 Document Page 12 of 56 Akilah Renee Saunders Debtor 1 First Name Case number (if known) 3.3. Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Debtor 1 only Model: the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: At least one of the debtors and another entire property? portion you own? Other information: 0.00 Check if this is community property (see 0.00 instructions) Who has an interest in the property? Check one. 3.4 Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D. Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: Check if this is community property (see 0.00 instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☑ No Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D. Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Other information: Current value of the Current value of the At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see 0.00 instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property, Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: entire property? At least one of the debtors and another portion you own? 0.00 Check if this is community property (see 0.00 instructions)

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

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Debtor 1

Akilah First Name

Renee

Document

Case number (if known)_

Part 3:

Describe Your Personal and Household Items

Middle Name

| Do you own or have any legal or equitable interest in any of the following items? | Current value of th portion you own? Do not deduct secured or exemptions. | _ |
|---|--|-------|
| 6. Household goods and furnishings | or exemptions. | |
| Examples: Major appliances, furniture, linens, china, kitchenware | | |
| No | | |
| Yes. Describe Furniture | | 00.00 |
| 7. Electronics | | |
| Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, p collections; electronic devices including cell phones, cameras, media players, gar | rinters, scanners; music | |
| ☐ No | | |
| Yes. Describe Electronics | \$ 10 | 0.00 |
| 8. Collectibles of value | | |
| Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other | r art objects; | |
| stamp, coin, or baseball card collections; other collections, memorabilia, collectible No | | |
| Yes. Describe | į. | 0.00 |
| O. Equipment forward by the | | |
| 9. Equipment for sports and hobbies Examples: Sports photographic quastics and although the second | | |
| Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, and kayaks; carpentry tools; musical instruments | golf clubs, skis; canoes | |
| ☑ No | | |
| Yes. Describe | : | 3.00 |
| li Nemo de la compansión de | \$ | 0.00 |
| 10. Firearms | | |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment | | |
| ☑ No ☐ Yes. Describe | | |
| Tes. Describe | \$ <u>0</u> | 00.0 |
| 11. Clothes | es esta des un esta com quanto un un que propa esta municipa que propaya a la seria com periode de la compansión de la compan | |
| Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | | |
| □ No | | |
| Yes. Describe Clothings | 600 | .00 |
| 12. Jeweiry | | |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jew | antana ara ada bar | |
| gold, silver | elly, watches, gems, | |
| ☑ No | The second secon | |
| Yes. Describe | \$ <u> </u> | .00 |
| 3. Non-farm animals | | |
| Examples: Dogs, cats, birds, horses | | |
| ☑ No | | |
| Yes. Describe | Φ 0. | 00 |
| 4. Any other personal and household items you did not already list, including any health ai | | _ |
| 2 No | ao you ala not list | |
| Yes. Give specific | man and the second a man sum of the second summary and a second summary and a second s | |
| information. | \$ | 00 |
| Add the dollar value of all of your entries from Part 3, including any entries for pages you | have attached | 00 |
| for Part 3. Write that number here | \$ 1,250.6 | 00 |

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Desc Main

Debtor 1

Akilah First Name

Renee

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Middle Nan

Case number (if known)_

Part 4: **Describe Your Financial Assets** Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Z No Yes.... 0.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No ☐ Yes..... Institution name: 17.1. Checking account: 0.00 17.2. Checking account: 0.00 17.3. Savings account: 0.00 17.4. Savings account: 0.00 17.5. Certificates of deposit: 0.00 17.6. Other financial account: 0.00 17.7. Other financial account: 0.00 17.8. Other financial account: 0.00 17.9. Other financial account: 0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ☑ No ☐ Yes..... Institution or issuer name: 0.00 0.00 0.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Name of entity: % of ownership: ☐ Yes. Give specific 0% 0.00 information about them..... 0% % 0.00 0% 0.00

Case 16-33046 Doc 1 Filed 10/17/16 Entered 10/17/16 15:01:37 Desc Main Page 15 of 56 Document Debtor 1 Renee Case number (if known)_ First Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **Ø** No ☐ Yes. Give specific Issuer name: information about them..... 0.00 0.00 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **2** No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: 0.00 Pension plan: 0.00 IRA: 0.00 Retirement account: 0.00 Keogh: 0.00 Additional account: 0.00 Additional account: 0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No **☑** Yes..... Institution name or individual: Electric: 0.00 Gas: 0.00 Heating oil: 0.00 Security deposit on rental unit: First Western Properties 1,250.00 Prepaid rent: 0.00 Telephone: 0.00 Water: 0.00

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

Rented furniture:

Other:

| ☑ No | | |
|-------|------------------------------|------------|
| ☐ Yes | Issuer name and description: | |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |

0.00

0.00

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Case 16-33046 Desc Main Document Page 16 of 56 Akilah Renee Debtor 1 Case number (if known) 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). **Ø** No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 0.00 0.00 0.00 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit Z No Yes. Give specific information about them. 0.00 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements 2 No Yes. Give specific information about them... 0.00 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses 2 No Yes. Give specific information about them. 0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **2** No Yes. Give specific information 0.00 Federal about them, including whether you already filed the returns 0.00 State: and the tax years. 0.00 Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Z No ☐ Yes. Give specific information..... 0.00 Alimony: 0.00 Maintenance 0.00 Support: 0.00 Divorce settlement

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information.....

0.00

Property settlement:

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Akilah Debtor 1 First Name

Renee Middle Name

Last Name

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| 31. Interests in insurance policies | | | | |
|---|--|--|--|---------------------|
| Examples: Health, disability, or life i No | nsurance; health savings account (HSA |); credit, homeowner's, or renter's insurance | | |
| Yes. Name the insurance compa | any Company name: | Beneficiary: | Surrende | er or refund value: |
| of each policy and list its va | alue | | _ | |
| | | | <u> </u> | 0.00 |
| | | | <u> </u> | 0.00 |
| | *************************************** | | <u> </u> | 0.00 |
| 32. Any interest in property that is du If you are the beneficiary of a living t property because someone has died 2 No | trust, expect proceeds from a life insura i. | nce policy, or are currently entitled to receive | | • |
| Yes. Give specific information | | | \$ | 0.00 |
| on Oleter and the Alberta at the Alberta | | er en kom generalen kan mengenkan kan mengenan mengenyang pengengan pengenyang di pengenyang kan mengenyang ka Terupak | o o o mara mana na | |
| | her or not you have filed a lawsuit or lisputes, insurance claims, or rights to s | | | |
| No Yes. Describe each claim | ann fa ill ac anna anna kackadadesele acha dari ante deser e e subject elemente e el e e al minde e | | | |
| Tes. Describe each claim. | | | \$ | 0.00 |
| 34. Other contingent and unliquidated | claims of every nature, including co | unterclaims of the debtor and rights | | |
| to set off claims ☑ No | | | | |
| Yes. Describe each claim | | | | |
| | | | \$ | 0.00 |
| | | | | |
| 35. Any financial assets you did not al | ready list | | | |
| ☑ No | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | |
| Yes. Give specific information | | | | 0.00 |
| | | | | |
| 36. Add the dollar value of all of your of for Part 4. Write that number here | | | → s | 1,250.00 |
| | | | | ***** |
| | | | | |
| Part 5: Describe Any Busine | ess-Related Property You Ow | n or Have an Interest In. List an | v roal octat | a in Dart 1 |
| | oo to a control of the control of th | or made an interest in Elst an | y rear estat | emrait i. |
| 37. Do you own or have any legal or ed | quitable interest in any business-rela | ted property? | | |
| No. Go to Part 6. | | | | |
| Yes. Go to line 38. | | | | |
| | | | Current va portion you Do not deduct or exemption | u own? |
| 38. Accounts receivable or commission | ns vou already earned | | , | |
| [7] No. | • | | | |
| ☐ Yes. Describe | and the second state of the second second section is an extended to the second second second section of the second | re gapt find from the copy of the first of the state of the first of t | · monagery a | 0.00 |
| | | and the control of th | \$ | 0.00 |
| 39. Office equipment, furnishings, and | • • | | | |
| | ftware, modems, printers, copiers, fax machi | nes, rugs, telephones, desks, chairs, electronic dev | ices | |
| ☑ No ☑ Yes. Describe | and a contract of the contract | | | 0.00 |
| - res. Describe | | | \$ | 0.00 |

Entered 10/17/16 15:01:37 Case 16-33046 Doc 1 Filed 10/17/16 Page 18 of 56 Akilah Debtor 1 Case number (if known) 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade **☑** No Yes. Describe... 0.00 41. Inventory **∡** No Yes. Describe 0.00 42. Interests in partnerships or joint ventures ☑ No Yes. Describe..... Name of entity: % of ownership: 0.00 0.00 0.00 43. Customer lists, mailing lists, or other compilations ☑ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 0.00 44. Any business-related property you did not already list ₩ No Yes. Give specific 0.00 information 0.00 0.00 0.00 0.00 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims

☐ Yes.....

47. Farm animals

☑ No

Examples: Livestock, poultry, farm-raised fish

0.00

or exemptions.

Akilah Renee Saunders Debtor 1 Case number (if known) 48. Crops—either growing or harvested **2** No ☐ Yes. Give specific information..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **☑** No ☐ Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed No. ☐ Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list No. Yes. Give specific information..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership 0.00 Yes. Give specific information..... 0.00 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 1,000.00 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 1,250.00 1,250.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 0.00 3,500.00 62. Total personal property. Add lines 56 through 61. 3,500.00 Copy personal property total -> 63. Total of all property on Schedule A/B. Add line 55 + line 62..... 3,500.00

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| official Form chedule | ne Middle Name ne Middle Name stcy Court for the: Northern Distr | Saunders Last Name Last Name rict of Illinois | | ☐ Check if this is a |
|--|---|--|--|--|
| Spouse, if filing) First Nar United States Bankrup Case number (If known) Official Form Chedule as complete and a | ntcy Court for the: Northern Distr | | | |
| official Form chedule as complete and a | 106C | rict of Illinois | | |
| fficial Form chedule as complete and a | | 1/54 (Marin 1/1) | | |
| official Form | | MANAYA TIRAN | | 1 1 7141 |
| chedule as complete and a | | | | amended filing |
| chedule as complete and a | | | | |
| as complete and a | ; of the Pro | perty You | Claim as Exemp | t 04/16 |
| ing the property yo ace is needed, fill o ur name and case r | u listed on <i>Schedule A/B: Pro</i> ut and attach to this page as | perty (Official Form 106 | ogether, both are equally responsible for s A/B) as your source, list the property that Additional Page as necessary. On the top | you claim as exempt. If more |
| any applicable sta irement funds—m its the exemption | itutory limit. Some exemption ay be unlimited in dollar an | ons—such as those for nount. However, if you nt and the value of the | I fair market value of the property bein r health aids, rights to receive certain l claim an exemption of 100% of fair ma property is determined to exceed that | benefits, and tax-exempt arket value under a law that |
| | the Property You Clain | | | |
| | | | | |
| 4 | emptions are you claiming? ning state and federal nonban | | f your spouse is filing with you. | |
| | ning state and federal normal ning federal exemptions. 11 L | | U.S.C. 9 522(D)(3) | |
| For any property | ı vou list on Schadula A/R t | hat you claim as avom | pt, fill in the information below. | |
| i or any property | you not on ourcount rob t | nat you claim as exem | pt, an in the anothiagon below. | |
| | of the property and line on at lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: | Furnishing | \$ 400.00 | ☑ \$ 400.00 | 735 ILCS 5/12-1001(b) |
| Line from | 6 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Electronics | \$ <u>100.00</u> | 2 1 \$ 100.00 | 735 ILCS 5/12-1001(b) |
| , | 7 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Line from Schedule A/B: | | \$ 600.00 | ☑ \$ 600.00 | 735 11 00 5/10 1001(5) |
| Schedule A/B: | Clothings | φ <u>υσυ.συ</u> | | 735 ILCS 5/12-1001(a) |
| Schedule A/B: Brief description: Line from | Clothings | φ <u>000.00</u> | ☐ 100% of fair market value, up to any applicable statutory limit | 130 ILOS 5/12-1001(a) |

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

Yes

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Debtor 1

Akilah

Renee

Saunders

Case number (if known)

Part 2:

Additional Page

| Brief descripti on Schedule A | on of the property and line i/B that lists this property | | it value of the | Amount of the exemption you claim | Specific laws that allow exemption |
|---|---|-------------------|---|---|--|
| | | Copy ti Schedi | ne value from <i>ile A/B</i> | Check only one box for each exemption | |
| Brief description: | 2002 Land Rover | \$ | 1,000.00 | □ \$ <u>2,400.00</u> | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: | 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Line from Schedule A/B: | Security Deposit | \$ | 1,250.00 | \$ 1,250.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| | | | | | |
| Brief description: | | \$ | | Q \$ | |
| Line from Schedule A/B: | | | | ☐ 100% of fair market value, up to any applicable statutory limit | 4 |
| Brief description: | | \$ | | Q s | |
| Line from Schedule A/B: | | | | 100% of fair market value, up to | |
| Brief description: | - | \$ | | 3 \$ | |
| Line from Schedule A/B: | | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | ` | \$ | | _ \$ | |
| Line from Schedule A/B: | | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | | a s | . |
| Line from Schedule A/B: | ~~~ | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | | - s | |
| Line from Schedule A/B: | | | | ☐ 100% of fair market value, up to any applicable statutory limit | The state of the s |
| Brief description: | | \$ | | | |
| Line from Schedule A/B: | | , | , | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | | □ s | v |
| Line from Schedule A/B: | | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | \$ | | □ \$ | |
| Line from Schedule A/B: | | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief | | | | | |
| description: | | \$ | | \$ 100% of fair market value, up to | |
| Schedule A/B: | Parkethanian managapen, exception managapen to the | | | any applicable statutory limit | |

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| F | ill in this in | formation to identi | ify your cas | e: | | | | | | | |
|-------------------|----------------------------|--------------------------|---|--|------------------------|--|--|-----------------------------|-------------------------------|---------------------------------------|---|
| D | ebtor 1 | Akilah | Renee | | Saunders | 3 | | | | | |
| D | ebtor 2 | First Name | Middle N | ame | Last Name | | | | | | |
| (S | Spouse, if filing) | First Name | Middle Na | ame | Last Name | | | | | | |
| U | nited States E | Bankruptcy Court for the | ie: Northern (| District of Illinois | \$ | | | | | | |
| | ase number f known) | | | | <u>.</u> | | | | Г | T Check i | if this is an |
| <u> </u> | | | | | | | | | • | amende | |
| \mathcal{C} |)fficial | Form 106D | 1 | | | | | | | | |
| | | | _ | . Who H | lovo Clo | ima Caass | معالمة | | | | |
| | | | | | | ims Secur | | | | | 12/15 |
| 113 | iormation. | ii more space is ne | eeaea, copy | the Additional | l Paαe, fill it out. | together, both are e number the entries, | qually responded | onsible t it to this | for supplyi s form, On | ing correct | t anv |
| ad | iditional pa | iges, write your nai | me and case | number (if kn | own). | , | ************************************** | | , twinn | the top c. | aliy |
| | | ditors have claims | | | | | | | | | |
| | No. Che | eck this box and sub | omit this form | to the court wit | h your other sche | edules. You have noth | ing else to re | eport on | this form. | | |
| | ∟ Yes. ⊦ıı | I in all of the informa | ation below. | | | | | | | | |
| Pai | rt 1: Lis | t All Secured Cla | aims | | | | | | | | |
| 2 | l iet all eac | ered alaima if a or | | 41 400 00 | | | Column A | | Column B | | Column C |
| 1 | for each cla | im. If more than one | e creditor has | s a particular cli | aim, list the other | ne creditor separately creditors in Part 2. | Amount of | | Value of that supp | collateral | Unsecured |
| | As much as | possible, list the cla | aims in alpha | betical order ac | cording to the cre | editor's name. | Do not dedu value of colla | | claim | orts this | portion If any |
| 2.1 | ļ | | | Describe the p | roperty that secur | res the claim: | \$ | 0.00 | \$ | 0.00 s | 0.00 |
| | Creditor's Nam | e | | | | Matter and the Committee of the Committe | | | - | | *************************************** |
| | Number | Street | | | | | To the second se | | | | |
| | | | | | you file, the claim | is: Check all that apply. | ***** | | | | |
| | | | | ☐ Contingent☐ Unliquidated | | | | | | | |
| | City | State | ZIP Code | Disputed | | | | | | | |
| W | ho owes the | e debt? Check one. | | Nature of lien. (| Check all that apply. | | | | | | |
| | Debtor 1 or | • | | | nt you made (such a | s mortgage or secured | | | | | |
| | Debtor 2 or | nly nd Debtor 2 only | | car loan) Statutory lien | (such as tax lien, m | nechanin's lian) | | | | | |
| ū | | e of the debtors and an | | Judgment lier | n from a lawsuit | | | | | | |
| | Checkift | his claim relates to a | а | Other (includi | ing a right to offset) | *************************************** | - | | | | |
| | communit | ty debt | | | | | | | | | |
| D a 2.2 | ate debt was | incurred | | e new volument de alle" de l'anne e na marche de l'anne e ne | account number | | Salari e Arati monar | , who should be designed as | eggerpromonyers or a southern | enem siii enem ye enemgen egener kees | -wyty characteristic orders and an analysis and a |
| | Creditor's Name | | | Describe the pr | operty that secure | es the claim: | \$ | 0.00 | \$ | 0.00 \$ | 0.00 |
| Ì | ordano o ridino | • | | | | | | | | | |
| Ī | Number | Street | | | | WARRANT AND ADMINISTRATION OF THE PROPERTY OF | | | | | |
| - | | | | As of the date y Contingent | ou file, the claim i | is: Check all that apply. | | | | | |
| _ | | | | Unliquidated | | | | | | | |
| | City | | ZIP Code [| Disputed | | | | | | | |
| | | debt? Check one. | | | heck all that apply. | | | | | | |
| | Debtor 1 on Debtor 2 on | | (| An agreement car loan) | you made (such as | mortgage or secured | | | | | |
| ā | | d Debtor 2 only | Ę | ····· | (such as tax lien, me | echanic's lien) | | | | | |
| | | of the debtors and and | other [| | from a lawsuit | | | | | | |
| | community | - | | | | The state of the s | | | | | |
| 002512877455200 | te debt was | incurred | E. Loud and the Colonial Institution of Ambrican Activities | central and an area of the second and the second an | account number | The the section of th | aan oo is minere ka sii ka oo | 0001 | the Police burner of growings | Serie ro - recosaro pargimentense | |

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| Fill in this i | ill in this information to identify your case: | | | | | | | | | |
|--------------------|--|-------------------------------|-------------|--|--|--|--|--|--|--|
| Debtor 1 | Akilah | Renee | Saunders | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | | |
| Debtor 2 | | | | | | | | | | |
| (Spouse, if filing | l) First Name | Middle Name | Last Name | | | | | | | |
| United States | Bankruptcy Court | for the: Northern District of | of Illinois | | | | | | | |
| Case number | | | | | | | | | | |
| (If known) | | | | | | | | | | |

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

| ne an | eded, copy the Part you need, fill it out, number y additional pages, write your name and case nu | the entries in the boxes on the left. Attach the Conti umber (if known). | nuatio | on Page to | this | page. On | the to | p of |
|----------|--|---|---------------------------------|------------|-------------------------|-------------|-------------|--------------------|
| Pa | art 1: List All of Your PRIORITY Unsecur | red Claims | | | | | | |
| 2. | each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the | reditor has more than one priority unsecured claim, list to a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's no Part 1. If more than one creditor holds a particular claim | at clai ame. I n, fist tl | m here and | d sho more editor | w both pri- | ority ar | nd / riority |
| 2.1 | Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | | 0.00 | \$ | 0.00 | S | 0.00 |
| .2 | Priority Creditor's Name Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | | 0.00 | \$ | 0.00 \$ | September 1 | 0.00 |

Case 16-33046 Doc 1 Filed 10/17/16 Entered 10/17/16 15:01:37 Desc Main Akilah Renee Document Page 24 of 56 humber (if known)

Debtor 1

| First Name | Middie Name | Last Name | | _ | Odde Halling In Modell |
|------------|-------------|-----------|-------------|---|------------------------|
| | | | | | |
| | | | | | |

| Ϋ́ | LIST All OF YOUR NUMPRIO | KITY Uns | secured Claims | | | | | |
|-----|--|---|------------------------------|---|----------------------------------|-----------------------|------------|--|
| 3. | Do any creditors have nonpriority un No. You have nothing to report in the Yes | | • . | | | | | |
| | List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one creclaims fill out the Continuation Page of | ditor separ ditor holds | ately for each clain | For each claim listed, identify wh | at type of claim it is. Do no | t list claims already | | |
| | | | | | | Total claim | | |
| 1.1 | 1st Progress/1st Equity | | | | 0 0 0 4 | i otai ciaiiii | | |
| | 1st Progress/1st Equity Nonpriority Creditor's Name | *************************************** | | Last 4 digits of account number | 0 0 9 4 | s 151.00 | 0 | |
| | P O BOX 84010 | | | When was the debt incurred? | 11/01/2014 | Ψ | | |
| | Number Street | | | • | .,,,,, | | | |
| | Columbus | GA | 31908 | | | | | |
| | City | State | ZIP Code | As of the date you file, the claim | is: Check all that apply. | | | |
| | | | | Contingent | | | | |
| | Who incurred the debt? Check one. | | | Unliquidated | | | | |
| | Debtor 1 only | | | Disputed | | | | |
| | Debtor 2 only | | | | | | | |
| | Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecu | red claim: | | | |
| | At least one of the debtors and another | | | Student loans | | | | |
| | ☐ Check if this claim is for a commu | nity debt | | Obligations arising out of a separ | ration agreement or divorce | | 1 | |
| | Is the claim subject to offset? | | | that you did not report as priority Debts to pension or profit-sharing | | | | |
| | ☑ No | | | Other, Specify Collection Account | | | | |
| | Yes | | | | | | - | |
| | PROBLEMS OF THE PROPERTY OF TH | | and the second second second | The Colonial and explicit explicit engage or equipment of the second of | O A S O | s 16,932.00 | oran) Y | |
| | Dept Of ED/Navient Nonpriority Creditor's Name | | | Last 4 digits of account number | <u>8 4 2 8</u> 10/01/2014 | \$ 10,932.00 | <u>'</u> | |
| | | | | When was the debt incurred? | 10/01/2014 | | | |
| | P O BOX 9635 Number Street | | | | | | | |
| | Wilkes Barre | PA | 18773 | As of the date you file, the claim | is: Check all that apply. | | - 2 | |
| | City | State | ZIP Code | ☐ Contingent | | | | |
| | Who incurred the debt? Check one. | | | Unliquidated | | | | |
| | Debtor 1 only | | | ☐ Disputed | | | - | |
| | Debtor 2 only | | | | | | | |
| | Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecu | red claim: | | | |
| | At least one of the debtors and another | | | Student loans | | | | |
| | ☐ Check if this claim is for a commun | ity debt | | Obligations arising out of a separathat you did not report as priority of | | | 1 | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing | plans, and other similar debts | | 1 | |
| | ☑ No | | | Other. Specify | | | : | |
| | Yes | rSv | | | | | i | |
| 3 | First Premier Bank | | | Last 4 digits of account number | 1 5 5 3 | | | |
| | Nonpriority Creditor's Name | | | | 07/01/2016 | s628.00 | | |
| | 601 S Minnesota Ave | | | when was the debt incurred? | 0770172010 | | : | |
| | Number Street | ^_ | E7464 | | | | : | |
| | Sioux Falls | SD State | 57104 ZIP Code | As of the date you file, the claim i | is: Check all that apply. | | | |
| | · | Quale | ZIF COGE | ☐ Contingent | | | : | |
| | Who incurred the debt? Check one. | | | Unliquidated | | | | |
| | Debtor 1 only | | | ☐ Disputed | | | | |
| | Debtor 2 only | | | | | | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Type of NONPRIORITY unsecur | ed claim: | | - | |
| | | | | Student loans | | | | |
| | ☐ Check if this claim is for a commun | ity debt | | Obligations arising out of a separa | | | | |
| | Is the claim subject to offset? | | | that you did not report as priority of Debts to pension or profit-sharing | | | į | |
| | ₩ No | | | Other. Specify <u>Credit Card</u> | Preside and Autor autiliar neorg | | | |
| | Yes | | | | | | 1 | |
| | | | | | | | | |

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Debtor 1

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Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

| usung any entries on this pag | je, number them | n beginning wit | h 4.4, followed by 4.5, and so forth. | Total claim |
|---|--|-------------------|--|----------------|
| Merrick Bank | | | Last 4 digits of account number 1 5 1 7 | s 2,400.0 |
| Nonpriority Creditor's Name P O BOX 9201 | | | When was the debt incurred? 07/01/2016 | * |
| Number Street Old Bethpage | NY | 11804 | As of the date you file, the claim is: Check all that apply. | |
| Oid betripage Oily Who incurred the debt? Check on | State | ZIP Code | Contingent Unliquidated Disputed | |
| Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | | | ☐ Student loans | |
| At least one of the debtors and ar Check if this claim is for a co | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| s the claim subject to offset? 1 No 1 Yes | | | Other. Specify Credit Card | |
| Credit Management lonpriority Creditor's Name | rav na 3 kná k s kulli dlikařejí čisočne k regni že gyrejívy | | Last 4 digits of account number 6 1 7 6 | s <u>245.0</u> |
| 1200 International Pkwy | | | When was the debt incurred? 05/01/2016 | |
| lumber Street Carroliton | TX | 75007 | As of the date you file, the claim is: Check all that apply. | |
| ity | State | ZIP Code | Contingent | |
| Vho incurred the debt? Check one | э. | | ☐ Unliquidated ☐ Disputed | |
| Debtor 1 only | | | T. (NONDODEN) | |
| Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and an | other | | Student loansObligations arising out of a separation agreement or divorce that | |
| Check if this claim is for a cor | nmunity debt | | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| s the claim subject to offset? No Yes | | | Other. Specify Collection Account | |
| Creditors Discount & A | d Marchild Cymrydd rymryddyng garlyndyd y m y i y myr | | Last 4 digits of account number 8 6 F 3 | \$ 418.0 |
| onpriority Creditor's Name | | | When was the debt incurred? 01/01/2010 | |
| -15 E Main St umber Street | 44 | 04004 | As of the date you file, the claim is: Check all that apply. | |
| Streator _{IV} | IL State | 61364 ZIP Code | Contingent | |
| /ho incurred the debt? Check one | | | Unliquidated | |
| Debtor 1 only | | | ☐ Disputed | |
| Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only At least one of the debtors and and | othar | | Student loans | |
| _ | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Check if this claim is for a con | nmunity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| the claim subject to offset? No Yes | | | ☑ Other Specify Collection Account | |

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Debtor 1

Middle Name

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| Aft | er listing any entries on this page, number them beginning with | 4.4, followed by 4.5, and so forth. | Total claim |
|-----|--|--|-------------|
| 4.7 | Diversified Consultants | Last 4 digits of account number 4 3 4 1 | s587.00 |
| | Nonpriority Creditor's Name 10550 Deerwood Park Blvd | When was the debt incurred? 04/01/2016 | |
| | Number Street Jacksonville FL 32256 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Yes | □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collection Account | |
| 4.8 | Cook Law Management | Last 4 digits of account number 3 5 7 1 | \$ 2,448.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? 07/25/2011 | |
| | 50 W. Washington St. Richard J. Daley Center Number Street Chicago IL 60602 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Judgement (Capital One) | |
| 1.9 | Bank Of America Bankruptcy Nonpriority Creditor's Name P O BOX 15168 | Last 4 digits of account number $8 	 4 	 2 	 8$ When was the debt incurred? $10/01/2016$ | \$_2,500.00 |
| | Number Street Willimington DE 19850 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? | □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Bank | |
| | Mo ☑ Yes | Cond. Opposity Saliti | ! |

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Debtor 1

Renee

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| er listing any entries on this page, number them beginning | with 4.4, followed by 4.5, and so forth. | Total cla |
|---|--|----------------------|
| Chase Bank | Last 4 digits of account number 8 4 2 8 | s 587 |
| Nonpriority Creditor's Name 10550 Deerwood Park Blvd | When was the debt incurred? 04/01/2016 | \$ <u></u> |
| Number Street Jacksonville FL 32256 | As of the date you file, the claim is: Check all that apply. | |
| Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No □ Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection Account | |
| TCF Bank Bankruptcy | Last 4 digits of account number 8 4 2 8 | \$ 2,500 |
| Nonpriority Creditor's Name 15350 Cedar Ave | When was the debt incurred? 10/01/2016 | |
| Number Street Apple Valley MN 55124 | As of the date you file, the claim is: Check all that apply. | |
| City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes | □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other, Specify Bank | |
| Little Company Of Mary | Last 4 digits of account number 8428 | _{\$} 3,000. |
| Nonpriority Creditor's Name 2800 W. 95th Street | When was the debt incurred? 10/01/2016 | |
| Number Street Evergreen Park IL 60805 | As of the date you file, the claim is: Check all that apply. | |
| City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only | ☐ Contingent☐ Unliquidated☐ Disputed | |
| Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: D Student loans | |
| ☐ At least one of the debtors and another☐ Check if this claim is for a community debt | Onligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Is the claim subject to offset? | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical | |

Debtor 1

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Renee

Dosaumoent Page 28 of 56 number (if known)

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

| r listing any entries on this page, numi | | | | Total claim |
|--|----------------------------|---|---|-------------|
| Holy Cross Hospital Nonpriority Creditor's Name | | | Last 4 digits of account number 8 4 2 8 | \$ 3,000.0 |
| 2701 W. 68th Street | | | When was the debt incurred? 10/01/2016 | |
| Number Street Chicago ! | L | 60629 | As of the date you file, the claim is: Check all that apply. | |
| | ate | ZIP Code | Contingent | |
| Who incurred the debt? Check one. | | | Unliquidated | |
| Debtor 1 only | | | Disputed | |
| Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | | | Student loans | |
| At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that | |
| Check if this claim is for a community | / debt | | you did not report as priority claims | |
| Is the claim subject to offset? ☑ No ☑ Yes | | | □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical | |
| AT&T Mobility | Philippion Nation (Single | engeroog valeting in a strictum stiffigeroof 6 for 1 e e in | Last 4 digits of account number 8 4 2 8 | \$ 590.00 |
| Nonpriority Creditor's Name | | | | |
| P O BOX 6416 Vumber Street | | | - When was the debt incurred? | |
| Carol Stream | | 60197 | As of the date you file, the claim is: Check all that apply. | |
| Dity Sta | | ZIP Code | Contingent | |
| AD | | | Unliquidated | |
| Who incurred the debt? Check one. | | | ☐ Disputed | |
| Debtor 1 only Debtor 2 only | | | Time of MONDPIODIST | |
| Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | | | Student loans | |
| Check if this claim is for a community | .1.1.1 | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| • | debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| s the claim subject to offset? -∡ | | | Other Specify Cellular | |
| 2 No D Yes | | | | |
| $y_{ij} = x_i - y_i - y_j - y$ | nink frankrik Seferatori — | takejo egot go met mi take tid. Sa elektron seksik si sedenji | | s 3,000.00 |
| F-Mobile Bankruptcy Team | | | Last 4 digits of account number 8 4 2 8 | * |
| onpriority Creditor's Name | | | When was the debt incurred? 10/01/2016 | |
| P O BOX 53410 umber Street | | ···· | | |
| amber street Bellevue W | 'Α | 98015 | As of the date you file, the claim is: Check all that apply. | |
| ity State | | ZIP Code | Contingent | |
| the incomed the debt of | | | ☐ Unliquidated | |
| /ho incurred the debt? Check one. | | | ☐ Disputed | |
| Debtor 1 only Debtor 2 only | | | Type of NONDRIORITY upspectred claims | |
| Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | | | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that | |
| Check if this claim is for a community of | rlaht | | you did not report as priority claims | |
| · | ucul | | Debts to pension or profit-sharing plans, and other similar debts | |
| the claim subject to offset? ¶No Nes | | | ☑ Other. Specify <u>Cellular</u> | |

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Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| - | 1 | aye, number tr | en negluuing Wi | th 4.4, followed by 4.5, and so forth. | Total claim |
|-----|--|--|---|---|---|
| 5.7 | City Of Chicago Dept. C | f Finance | | Last 4 digits of account number 8 4 2 8 | \$ 2,600.0 |
| | P O BOX 4641 | | | When was the debt incurred? 10/01/2016 | - |
| | Number Street Chicago | <u>IL</u> | 60680 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a control of the debtor and | another | ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? No Yes | | | Other, Specify Tickets, Fines & Fees | |
| 5.8 | Illinois Tollway | o garringrenn fransk er Scholololou († Seme I ar affallsyn daed in g | a paramet (march all 1 to tradition) I major voi gene ord annoch | Last 4 digits of account number 8 4 2 8 | \$ 500.00 |
| : | Nonpriority Creditor's Name 2700 Ogden Ave | | | When was the debt incurred? 10/01/2016 | |
| | Number Street Downers Grove | IL | 60515 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check o | State ne. | ZIP Code | Contingent Unliquidated Disputed | |
| : | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a | | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a coll is the claim subject to offset? ☐ No ☐ Yes | ommunity debt | | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Tickets, Fines & Fees | |
| 5.9 | Nipsco | Municipality and the month of the control of the co | and and the second | Last 4 digits of account number 8 4 2 8 | \$ 300.00 |
| : | Nonpriority Creditor's Name POBOX 13007 | | | When was the debt incurred? 10/01/2016 | |
| | Number Street Merriville City | IN | 46411 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check or Debtor 1 only | State ne. | ZIP Code | Contingent Unfiquidated Disputed | : |
| | ☐ Debtor 2 only☐ Debtor 2 only☐ At least one of the debtors and ar | oother | | Type of NONPRIORITY unsecured claim: Student loans | . ! |
| | ☐ Check if this claim is for a co | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | s the claim subject to offset? ☑ No ☑ Yes | | | Other. Specify Utility | |

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Debtor 1

Last Name

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

| | ד | iumber th | em beginning wi | th 4.4, followed by 4.5, and so forth. | Total claim |
|--|---|--|---|--|--------------------|
| 6.1 | ^J Comcast | | | Last 4 digits of account number 8 4 2 8 | 693 O |
| | Nonpriority Creditor's Name P O BOX 3002 | | | When was the debt incurred? 10/01/2016 | \$ <u>682.00</u> |
| | Number Street Southeastern | PA | 19398 | As of the date you file, the claim is: Check all that apply. | |
| The second secon | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commits the claim subject to offset? No Yes | | ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cable | |
| 6.2 | National Quik Cash | መቀ፤ ነዎ ያመንቀስ ተስፈርተ አቀም ነገ ነገ | umbara gili da karanga Pilaya ramana kapita bangang gili dan bara kara, ara, | Last 4 digits of account number 8 4 2 8 | \$_1,300.00 |
| | Nonpriority Creditor's Name | | | | \$ <u>1,300.00</u> |
| | 8502 South Cicero Number Street | | | | |
| | Burbank _{City} | IL State | 60459 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset? No Yes | | | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify PayDay Loan | |
| 3.3 | Idaya Auto Sales | 3 to the first of the section of the | a e veza, egun 10 di ingologica kema kira e sin qurin vigin vez entimo e a ri | Last 4 digits of account number 8 4 2 8 | \$ 2,500.00 |
| Ī | Nonpriority Creditor's Name 325 W 79th St. | | | When was the debt incurred? 10/01/2016 | |
| Ī | Number Street Chicago | IL | 60620 | As of the date you file, the claim is: Check all that apply. | |
| () () () () () () () () () () () () () (| Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communis the claim subject to offset? No Yes | State | ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Automobile | |

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Case number (if known)

Debtor 1

Renee Middle Name

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| r listing any entries on this page, number t | nem beginning wi | th 4.4, followed by 4.5, and so forth. | Total |
|--|--|--|--|
| Chex System | | Last 4 digits of account number 8 4 2 8 | |
| Nonpriority Creditor's Name 7805 Hudson Rd | | When was the debt incurred? 10/01/2016 | \$ |
| Number Street Woodberry MN | EE40E | As of the date you file, the claim is: Check all that apply. | |
| City State | 55125 ZIP Code | Contingent | |
| Who incurred the debt? Check one. | | Unliquidated | |
| Debtor 1 only | | ☐ Disputed | |
| Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | Student loans | |
| Check if this claim is for a community deb | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| s the claim subject to offset? | t | Debts to pension or profit-sharing plans, and other similar debts | |
| Mo | | ☑ Other Specify Notice Only | |
| Yes | | | |
| Equifax Bankruptcy Dept. | of the substitute histograph and all the substitutions and substitutions and substitutions and substitutions a | Last 4 digits of account number 8 4 2 8 | er i romberere investamatione |
| Nonpriority Creditor's Name | | | Ψ |
| P.O. Box 740241 | | When was the debt incurred? 10/01/2016 | |
| Atlanta GA | 30374 | As of the date you file, the claim is: Check all that apply. | |
| ty State | ZIP Code | Contingent | |
| Who incurred the debt? Check one. | | ☐ Unliquidated ☐ Disputed | |
| Debtor 1 only | | □ Dispated | |
| Debtor 2 only Debtor 1 and Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | | Student loans | |
| Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| the claim subject to offset? | | Debts to pension or profit-sharing plans, and other similar debts | |
| 1 No | | Other Specify Notice Only | |
| Yes | k A to be made in the first the state of the | CONTINUE OF THE PROPERTY OF TH | "Per III, Hadalihiar Ganziarik, da Zengger (Ungg |
| xperian Bankruptcy Dept. | | Last 4 digits of account number 8 4 2 8 | \$0 |
| .O. Box 2002 | | When was the debt incurred? 10/01/2016 | |
| mber Street Ilen TX | 75013 | As of the date you file, the claim is: Check all that apply. | |
| y State | ZIP Code | Contingent | |
| ho incurred the debt? Check one. | | ☐ Unliquidated ☐ Disputed | |
| Debtor 1 only | | - Disputed | |
| Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans | |
| Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| · · | | Debts to pension or profit-sharing plans, and other similar debts | |
| the claim subject to offset? No | | Other. Specify Notice Only | |
| Yes | | | |

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Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| After listing any entries on this page, number them beginning wit | ith 4.4, followed by 4.5, and so forth. | Total claim |
|--|--|-------------|
| Trans Union Bankruptcy Dept. Nonpriority Creditor's Name | Last 4 digits of account number 8 4 2 8 | s0.00 |
| P O BOX 1000 | When was the debt incurred? 10/01/2016 | |
| Number Street Chester PA 19022 | As of the date you file, the claim is: Check all that apply. | |
| City State ZIP Code Who incurred the debt? Check one. Debtor 1 only | Contingent Unliquidated Disputed | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another | Student loansObligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Notice Only | |
| .8 Certegy Check Service | Last 4 digits of account number 8 4 2 8 | \$0.00 |
| Nonpriority Creditor's Name | When was the debt incurred? 10/01/2016 | |
| P.O. Box 30046 Number Street | | |
| Tampa FL 33630 | As of the date you file, the claim is: Check all that apply. | |
| City State ZIP Code | Contingent | |
| Who incurred the debt? Check one. | ☐ Unfiquidated ☐ Disputed | |
| Debtor 1 only | a bisputed | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | ☐ Student loans | |
| ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? ☑ No ☐ Yes | Other Specify Notice Only | |
| | Last 4 digits of account number | \$ |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| City State ZIP Code | Contingent | |
| Who incurred the debt? Check one. | ☐ Unliquidated☐ Disputed | |
| Debtor 1 only | proportion | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | ☐ Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? | Other. Specify | : : |
| Yes | | : |

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Add the Amounts for Each Type of Unsecured Claim

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Debtor 1

Dogument

Part 4:

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.

| | | | | Total claim | |
|--------------|-------|---|-----|-------------|-----------|
| Total claims | 68 | a. Domestic support obligations | 6a. | \$ | 0.00 |
| from Part 1 | 6t | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 60 | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | + \$ | 0.00 |
| | 6e | . Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Total claim | |
| Total claims | 6f. | Student loans | 6f. | \$ | 16,932.00 |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | + \$ | 29,936.00 |
| | 6j. 1 | Fotal. Add lines 6f through 6i. | 6j. | \$ | 46,868.00 |

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Doguments

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Case number (#known)

Debtor 1

Part 3: List Others to Be Notified About a Debt That You Aiready Listed

| City Of Chicago City | | | ove more than one creditor for any of the debts that you listed in Parts 1 or 2, list the sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? |
|--|--|--|--|
| 121 N. LaSalle Street | . | | |
| Number Street | | ···· | Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | | Part 2: Creditors with Nonpriority Unsecured Clai |
| Chicago | IL State | 60602 | Last 4 digits of account number 3 5 7 1 |
| employees and experience of the contract of th | State | ZIP Code | and the second of the second o |
| Capital One Bank | ··· | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| P O Box 30281 | | | Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | 300 | ···· | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims Claims |
| Salt Lake City | UT State | 84130 ZIP Code | Last 4 digits of account number 3 5 7 1 |
| Secretary Of State | or a control of the c | Mitemahan meritati di dalah peres Menderak peresa | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 2701 S. Dirksen Parkv | M2V | | |
| lumber Street | way | | Line 5.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | | Part 2: Creditors with Nonpriority Unsecured |
| Springfield | IL State | 62723 ZIP Code | Last 4 digits of account number 8 4 2 8 |
| ane | - Spanier in Sudant of Sunner Englisher on Sun | Santa de la compania | On which entry in Part 1 or Part 2 did you list the original creditor? |
| uno | | | |
| umber Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | | Claims Part 2: Creditors with Nonpriority Unsecured |
| ty | State | ZIP Çode | Last 4 digits of account number |
| me | (g. makabban gangi kamata, bagan a ga a maya a, fara a a a | Additional Annual Control of the State of th | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 5-10 | | | |
| ımber Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | | Claims Part 2: Creditors with Nonpriority Unsecured |
| | State | ZIP Code | Last 4 digits of account number |
| ne | | 2000 tilled y 1977 til 1977 til | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| mber Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims — 7 at 2. Ordators with Nonphorny Onsecured |
| THE TENNES CONTROL OF THE STATE | State | ZIP Code | Last 4 digits of account number |
| ne | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| nber Street | | | |
| | | | Claims Part 2: Creditors with Nonpriority Unsecured |
| | · | | Last 4 digits of account number |
| | State | ZIP Code | wast 4 digits of accopill lighiber |

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| ent in talls | | entify your case: | | | |
|---|--|--|--|--|---------------|
| Debtor | Akilah First Name | Renee Middle Name | Saunders Last Name | | |
| Debtor 2 (Spouse If filin | Cil Eirol Manua | | | | |
| | | Middle Name | Last Name | | |
| | | or the: Northern District o | fillinois | | |
| Case numbe (If known) | r | | | ☐ Check if this is | an |
| | | | | amended filing | } |
| Official | Form 1060 | 2 | | | |
| | | | | | |
| <u> scnea</u> | ule G: Ex | kecutory Co | ntracts an | d Unexpired Leases 12/15 | |
| 1. Do you No. Yes. 2. List sepexample | have any executor Check this box and Fill in all of the info | ory contracts or unexpired file this form with the contraction below even if the contraction or company with when the contraction or contraction o | red leases? For the contracts or leases a | edules. You have nothing else to report on this form. re listed on Schedule A/B: Property (Official Form 106A/B). tract or lease. Then state what each contract or lease is for (for m in the instruction booklet for more examples of executory contracts a | nd |
| | | whom you have the co | ntract or lease | State what the contract or lease is for | |
| Name | /estern Propert | ues | | Primary Residential Yearly Lease. | |
| 1205 V Number | V. Adams St. Street | | | _ | |
| Chicag | | IL 60607 | | | |
| City | | State ZIP Code | | - | |
| 2 | | | | and the second of the second o | ar referen |
| Name | | | | - | |
| Number | Street | | | | |
| | | | | | |
| City | | State ZIP Code | | en e | To Stampate a |
| 3 | | | | | |
| Name | | | · · · · · · · · · · · · · · · · · · · | | |
| Number | Street | | | | |
| City | | State 7/D C-4: | | | |
| 4 | Secretaria de la composição de la compos | State ZIP Code | a coop wherever is a salidation . | The state of the s | n epigens |
| Name | | | | | |
| | | | | | |
| Number | Street | | | | |
| City | | State ZIP Code | | | |
| 5i | kytyspäärä automatajon varia, retugejoiki eren peter vuonjug | ra et estratistica (l'arcelo estrate a la estrate de l | men e komitine i i nord e gregoriet i novem e ne men governe per general per general | sometiment of the second of | 15,110 |
| Name | | *************************************** | | | |
| | | | | | |
| Number | Street | | | | |

State

ZIP Code

City

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| Debtor 1 | Akilah | Renee | Saunders | |
|------------------|------------------------|----------------------------|------------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if fili | ng) First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court fo | r the: Northern District o | f Illinois | |
| 0111100 01010 | | | | |

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as comle nd

| filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it in umber the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name number (if known). Answer every question. | | | |
|---|---|---|--|
| Do you have any codebto ☑ No ☐ Yes | rs? (If you are filing a joint case, do | o not list either spouse | as a codebtor.) |
| Within the last 8 years, h | ave you lived in a community pro Louisiana, Nevada, New Mexico, Pi | perty state or territo uerto Rico, Texas, Wa | ery? (Community property states and territories include ashington, and Wisconsin.) |
| 🗹 No. Go to line 3. | | | · |
| Yes. Did your spouse, fNo | ormer spouse, or legal equivalent li | ive with you at the time | e? |
| Yes. In which community state or territory did you live? | | | Fill in the name and current address of that person. |
| Name of your spouse, for | mer spouse, or legal equivalent | | _ |
| Number Street | | | |
| City | State | ZIP Code | Advanta |
| Column 1: Your codebtor | | | Column 2: The creditor to whom you owe the de |
| | | | |
| Name | | | Schedule D, line |
| Number Street | | | Schedule E/F, line |
| Dity | State | ZIP Code | VARIABLE AND |
| Name | | | Schedule D, line |
| Number Street | | | Schedule E/F, line |
| | | | Schedule G, line |
| <u> Ity</u> | State | ZIP Code | |
| lame | | | Schedule D, line |
| | | | Schedule E/F, line |
| Number Street | | | ☐ Schedule G, line |
| City | State | ZIP Code | |
| City | State | ZIP Code | |

| | | Case 16- | 33046 | Doc 1 | | 10/17/16 | | 10/17/16 | 15:01:37 | Desc Main |
|----------|--------------------------------|---|-----------------------------|---------------------------------------|---|--------------------------------------|---------------------------------------|---------------------------------------|-----------------------------|--|
| | Fill in this i | nformation to | identify y | our case: | Doc | ument | Page 37 | of 56 | | |
| | | Akilah | D | | · | manditan dia m | glitter profiterioff. | | | |
| | Debtor 1 | First Name | Renee | Sau Middle Name | nders | Last Name | | | | |
| | Debtor 2 (Spouse, if filing |) First Name | ···· | Middle Name | ····· | Last Name | | | | |
| | United States | Bankruptcy Cou | rt for the: N | orthern Distric | t of Illinois | | S | | | |
| | Case number | | | | | _ | | Check | f this is: | |
| L | (II KIIOWII) | | ···· | | | | | | r uns is. Imended filing | 1 |
| | | | | | | | | 🔲 A st | pplement sho | owing postpetition chapter 13 |
| <u>C</u> | Official Fo | orm 106I | | | | | | | | following date: |
| 5 | Sched | lule I: | You | r Inco | me | | | MM / | DD / YYYY | |
| В | e as comple | te and accura | ate as nos | sible If two n | norminal na | onle are filin | n to mother (D) | | | 12/15 |
| Sl | ipplying coi | rect informat | ion. If you | are married | narried pe and not fi | iopie are tilini ling jointly, ai | g together (De nd your spous | btor 1 and Del se is living with | otor 2), both ai | e equally responsible for information about your spouse |
| IT Se | you are sep parate shee | arated and you | our spouse. On the to | e is not filing op of any add | with you, litional pa | do not includ | de information | about your s | ouse. If more | information about your spouse space is needed, attach a wer every question. |
| | | | | | | J==, , C. | | sase multiper (II | Known). Ans | wer every question. |
| L | Part 1: | Describe Er | nployme | nt | | | - | | | |
| 1. | Fill in your | employment | | | | <u>.</u> | | | | |
| | | more than on | e iob | | | Debtor | | | Debtor | 2 or non-filing spouse |
| | attach a se | parate page w about addition | rith | Employment s | etatue | D | | | _ | |
| | employers. | about addition | nai 😁 | mpioyment s | status | ☑ Employ ☐ Not em | | | ☐ Emp | loyed ∍mployed |
| | Include par self-employ | t-time, season | al, or | | | | , , , | | WW 14064 | employed |
| | Occupation | may include s ker, if it applie | tudent | Occupation | | Operation | ı Clerk | · · · · · · · · · · · · · · · · · · · | - | |
| | | | E | mployer's na | me | <u>UPS</u> | · · · · · · · · · · · · · · · · · · · | | | |
| | | | E | mployer's ad | dress | 601 West | 172nd Stre | ~ + | | |
| | | | | , , | | Number St | | El | Number 5 | Street |
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| | | | | | | ~ | | | | |
| | | | | | | South Hol | | | | |
| | | | н | ow long ampl | nund the | City | State Ž | ZIP Code | City | State ZIP Code |
| | | | 110 | ow long empl | oyea ther | e? 1 Yr | | | - | |
| P | art 2: G | ive Details | About Mo | onthly inco | me | | | | | |
| | Estimate me | | as of the | | *************************************** | . If you have n | othing to repor | rt for any line, w | rite \$0 in the sr | ace. Include your non-filing |
| | If you or you | r non-filing spo | ouse have i | more than one | employer | combine the | | all employers f | | |
| | below. It you | need more sp | ace, attach | h a separate s | heet to this | s form. | | uniproyoto t | or that person t | on the lines |
| | | | | | | | F | or Debtor 1 | For Debto | |
| 2. | List monthl deductions) | ly gross wag e . If not paid me | es, salary, onthly, calc | and commiss | sions (before monthly w | ore all payroll wage would be |). 2. | 1 282 00 | | The second secon |
| 3. | | nd list monthl | | | | | 3. +s | 1,282.00 0.00 | \$ | |
| | | | | • | | | ο, τ <u>\$_</u> | | T \$ | |
| r. | Calculate g | ross income. | Add line 2 | + line 3. | | | 4. \$_ | 1,282.00 | \$ | |
| | | | | a a a a a a a a a a a a a a a a a a a | | | | | | |

Debtor 1

Case 16-33046 Akilah Renee

Doc 1 Filed 10/17/16 Entered 10/17/16 15:01:37 Desc Main Saunders Document Page 38 of 56 Case number (if known)

Middle Name

| | | F | or Debtor 1 | For Debto | r 2 or spouse | 4.0.000 |
|---|------------|---------------|----------------|--------------------|---|-------------------------|
| Copy line 4 here | → 4 | . \$ | 1,282.00 | \$ | Process Section of the Intelligence Community | |
| 5. List all payroll deductions: | | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a | ı. \$ | 132.00 | • | | |
| 5b. Mandatory contributions for retirement plans | 5b | Ψ. | | \$ | | |
| 5c. Voluntary contributions for retirement plans | 50 | | 0.00 | \$ | | |
| 5d. Required repayments of retirement fund loans | 5d | ~~ | | | | |
| 5e. Insurance | 5e | | 2.00 | | · | |
| 5f. Domestic support obligations | 5f. | | 0.00 | \$ | - | |
| 5g. Union dues | 5g | \$ | 15.00 | | | |
| 5h. Other deductions. Specify: United Way | 5h | | 10.00 | | | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | | · · Ψ_ \$_ | 157.00 | <u> </u> | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 1,125.00 | \$ | Marks y my vas | |
| 8. List all other income regularly received: | | | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | • | \$ | 0.00 | \$ | | |
| 8b. Interest and dividends | 8a. 8b. | ф. | 0.00 | Ψ | | |
| 8c. Family support payments that you, a non-filing spouse, or a depende regularly receive | nt | a | 0.00 | \$ | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | | |
| 8d. Unemployment compensation | 8d. | \$ | 0.00 | \$ | | |
| 8e. Social Security | 8e. | \$ | 0.00 | \$ | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: n/a | ce 8f. | \$ | 0.00 | \$ | | |
| 8g. Pension or retirement income | | · · · · · | | Ψ | | |
| 8h. Other monthly income. Specify:n/a | 8g. | \$ | 0.00 | \$ | | |
| | 8h. | +\$ | 0.00 | +\$ | | |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. | 9. | \$ | 0.00 | \$ | | |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ | 1,125.00 | \$ | 0.00 = | \$1,125.00 |
| 11. State all other regular contributions to the expenses that you list in Schedulinclude contributions from an unmarried partner, members of your household, you friends or relatives. | ur de | pende | | | | |
| Do not include any amounts already included in lines 2-10 or amounts that are no Specify: n/a | ot ava | ailable | to pay expense | s listed in Sche | _ | 0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain States | sult i | s the c | ombined month | ly income. lies | 11. + \$ | 0.00 3 1,125.00 |
| 13. Do you expect an increase or decrease within the year after you file this follows. | m? | | | | | combined nonthly income |
| Yes. Explain: | | | | | <u> </u> | |

Case 16-33046 Doc 1 Filed 10/17/16 Entered 10/17/16 15:01:37 Desc Main Page 39 of 56 Document Fill in this information to identify your case: Akilah Renee Saunders Debtor 1 Check if this is: Last Name Debtor 2 (Spouse, if filing) First Name An amended filing Middle Name Last Name ☐ A supplement showing postpetition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois 100 expenses as of the following date: Case number (If known) MM / DD / YYYY Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Your Household** 1. Is this a joint case? Mo. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? **1** No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? **₩** No Dependent's relationship to Do not list Debtor 1 and Dependent's Yes. Fill out this information for Does dependent live Debtor 1 or Debtor 2 Debtor 2. age with you? each dependent..... Do not state the dependents' ☐ No names. Yes ☐ No ☐ Yes ☐ No ☐ Yes □ No ☐ Yes ☐ No Yes 3. Do your expenses include **2** No expenses of people other than Yes yourself and your dependents? **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 500.00 If not included in line 4: Real estate taxes 4a. 0.00 4a. 4b. Property, homeowner's, or renter's insurance 4b. 0.00 4c. Home maintenance, repair, and upkeep expenses 4c. 0.00 4d. Homeowner's association or condominium dues 4d. 0.00

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Debtor 1 Akilah Renee Saunders Case number (if known)

| | | | Your expe | nses |
|-----|---|------------|-----------|--------|
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5 . | \$ | 0.00 |
| | Utilities: | | | |
| 6. | 6a. Electricity, heat, natural gas | 6a. | \$ | 80.00 |
| | 6b. Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 103.00 |
| | 6d. Other. Specify: n/a | 6d. | \$ | 0.00 |
| 7. | Food and housekeeping supplies | 7. | \$ | 100.00 |
| 8. | Childcare and children's education costs | 8. | \$ | 0.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ | 80.00 |
| 10. | Personal care products and services | 10. | \$ | 50.00 |
| 11. | Medical and dental expenses | 11. | \$ | 0.00 |
| | Transportation. Include gas, maintenance, bus or train fare. | | * | 00.00 |
| 12. | Do not include car payments. | 12. | \$ | 90.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 25.00 |
| 14. | Charitable contributions and religious donations | 14. | \$ | 80.00 |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | \$ | 0.00 |
| | 15b. Health insurance | 15b. | \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. | \$ | 40.00 |
| | 15d. Other insurance. Specify: n/a | 15d. | \$ | 0.00 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a | 16. | \$ | 0.00 |
| 17. | Installment or lease payments: | | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. Other. Specify: n/a | 17c. | \$ | 0.00 |
| | 17d. Other. Specify: n/a | 17d. | \$ | 0.00 |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| 19. | Other payments you make to support others who do not live with you. | | | 2.00 |
| | Specify: n/a | 19. | \$ | 0.00 |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ie. | | |
| | 20a. Mortgages on other property | 20a. | .\$ | |
| | 20b. Real estate taxes | 20b. | \$ | |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |

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| Debto | or 1 | Akilah First Name | Middle Name | Renee Last Name | Saunders | Ca | ase number (if known) | Mr. | |
|----------------|----------|----------------------|----------------|--------------------|---|--------------------|--|--|--|
| 21. (| Other. S | Specify: <u>n/a</u> | | | | _ | 21. | + \$ | 0.00 |
| 22. C | alculat | e your mont | thly expenses | 3. | | | | TO THE STATE OF TH | ann a marainn mei ga marainn a marainn (, 1, 1 - ga marain), a 1 thabh a gh a bha a bha abhaile and a sabann |
| 2 | 2a. Add | l lines 4 throu | ugh 21. | | | | 22a. | \$ | 1,148.00 |
| 2 | 2b. Cop | y line 22 (mo | onthly expense | es for Debtor 2), | if any, from Official Forn | m 106J-2 | 22b. | \$ | 0.00 |
| 2 | 2c. Add | l line 22a and | 22b. The res | ult is your month | ly expenses. | | 22c. | \$ | 1,148.00 |
| | | | | | | | | 5 | and the second s |
| | | • | lly net incom | | | | | <i>p</i> - | 1,125.00 |
| 23 | a. Cop | oy line 12 (yo | ur combined i | monthly income) | from Schedule I. | | 23a. | \$ | 1,120.00 |
| 231 | o. Cop | by your month | hly expenses | rom line 22c abo | ove. | | 23b. | - \$ | 1,148.00 |
| 230 | c. Sub | otract your mo | onthly expens | es from your mo | nthly income. | | | _ | -23.00 |
| | The | result is you | r monthly net | income. | | | 23c. | <u> </u> | -23.00 |
| | | | | | | | | | |
| 24. D o | you ex | kpect an inc | rease or decr | ease in your ex | penses within the year | r after you file t | this form? | | |
| | | | | | car loan within the year of a modification to the t | | | | |
| Ø | No. | | | | | | | | |
| | Yes. | Explain he | | | | | The second state of the se | | |
| | | | | | | | | | |
| | | : | | | | | | | |
| | | | | | | | | | |

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| orm 106[| Renee Middle Name Middle Name e: Northern District o | Saunders Last Name Last Name of Illinois | | | ☐ Check if this is amended filing |
|---------------------------------------|--|--|--|---|---|
| t Name t Name kruptcy Court for the | Middle Name Middle Name e: Northern District c | Last Name Last Name | | | |
| t Name t Name kruptcy Court for the | Middle Name Middle Name e: Northern District c | Last Name Last Name | | | |
| orm 106 | e: Northern District o | | | | |
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| orm 106[| | of Illinois | | | |
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| ation 🖊 | About an | Individual | i Debtor's S | chedules | 12/15 |
| his form whene By or property b | ver you file bankrup by fraud in connecti | otcy schedules or amer | odod sakadala - 18 tr | | cealing property, or sonment for up to 20 |
| n Below or agree to pay | ronica Eason | IOT an attorney to help | you fill out bankruptcy fo | | |
| F - | neople are filing his form whene by or property to 18 U.S.C. §§ 15 n Below | neople are filing together, both are his form whenever you file bankru by or property by fraud in connecti 18 U.S.C. §§ 152, 1341, 1519, and 3 n Below | neople are filing together, both are equally responsible for his form whenever you file bankruptcy schedules or amendy or property by fraud in connection with a bankruptcy of 18 U.S.C. §§ 152, 1341, 1519, and 3571. | neople are filing together, both are equally responsible for supplying correct inform whenever you file bankruptcy schedules or amended schedules. Making a by or property by fraud in connection with a bankruptcy case can result in fines up 18 U.S.C. §§ 152, 1341, 1519, and 3571. | people are filing together, both are equally responsible for supplying correct information. his form whenever you file bankruptcy schedules or amended schedules. Making a false statement, con by or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or impri 18 U.S.C. §§ 152, 1341, 1519, and 3571. |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X Signature of Debtes

×

Signature of Debtor 2

Date 10 14 2016

Date _____

Case 16-33046 Doc 1 Filed 10/17/16 Entered 10/17/16 15:01:37 Desc Main Page 43 of 56 Document Fill in this information to identify your case: Akilah Renee Saunders Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) ☐ Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? ■ Married Mot married 2. During the last 3 years, have you lived anywhere other than where you live now? **☑** No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2: Dates Debtor 2 lived there lived there Same as Debtor 1 Same as Debtor 1 From From Number Number Street Τо City State ZIP Code City State ZIP Code Same as Debtor 1 ☐ Same as Debtor 1 From Number Number Street Τo Tα City State ZIP Code State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ☐ No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2:

Explain the Sources of Your Income

Case 16-33046 Doc 1 Filed 10/17/16 Entered 10/17/16 15:01:37 Desc Main Page 44 of 56 Document Akilah Renee Saunders Debtor 1 Case number (if known) First Name Middle Name 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income Sources of income **Gross** income Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, From January 1 of current year until Wages, commissions. 10,894.00 bonuses, tips the date you filed for bankruptcy: bonuses, tips Operating a business Operating a business Wages, commissions, Wages, commissions, For last calendar year: 0.00 bonuses, tips bonuses, tips (January 1 to December 31,2015 Operating a business Operating a business Wages, commissions. For the calendar year before that: Wages, commissions, bonuses, tips bonuses, tips 0.00 (January 1 to December 31, 2014 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. M No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source each source Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy:

For last calendar year:

(January 1 to December 31,2015

For the calendar year before that: (January 1 to December 31,2014 Case 16-33046

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Desc Main

Debtor 1

Part:

Akilah

Document

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Renee Saunders Case number (if known) First Name Last Name

| List Certain | Payments | You M | lade B | efore | You | Filed | for i | Bankrun | tev |
|--------------|-----------------|-------|--------|-------|-----|-------|-------|---------|-----|
| | | | | | | | | | ••• |

| . Are eit | ther Debtor 1's or Debtor 2's debts primarily | consumer de | bts? | | | | |
|-----------|--|--|---|-------------------------------|----------------------------|------------------------------|----------------------|
| | Neither Debtor 1 nor Debtor 2 has primari "incurred by an individual primarily for a pers | ily consumer o | debts. Consu | 11.11.13.15.EM | | | 91(8) as |
| | During the 90 days before you filed for bankr | uptcy, did you | pay any cred | itor a total of s | \$6,425* or r | nore? | |
| | No. Go to line 7. | | | | | | |
| | Yes. List below each creditor to whom yo total amount you paid that creditor. I child support and alimony. Also, do | ou paid a total o Do not include not include pay | of \$6,425* or payments for ments to an | more in one o domestic sur | r more payi | ments and the tions, such as | |
| | * Subject to adjustment on 4/01/19 and every | 3 years after t | that for cases | filed on or aft | is bankrupt er the date | cy case. of adjustment | |
| ☐ Yes | s. Debtor 1 or Debtor 2 or both have primaril | | | | ar and date | or adjustment. | |
| | During the 90 days before you filed for bankru | uptov, did vou r | obis. Dav anv credi | tor a total of \$ | 600 ar mar | ~? | |
| | ☑ No. Go to line 7. | . ,, , , | ,, 5.00. | ioi a total or p | 000 01 111011 | 0 | |
| | Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payments | | | | | ou paid that and | |
| | | Dates of payment | Total amo | unt paid | Amount y | ou still owe | Was this payment for |
| | Creditor's Name | | \$ | 0.00 | \$ | 0.00 | ☐ Mortgage |
| | | | | | | | Car |
| | Number Street | <u></u> | | | | | Credit card |
| | | | | | | | Loan repayment |
| | | | | | | | Suppliers or vendors |
| | City State ZIP Code | | | | | | Other |
| | | | \$ | 0.00 | e | 0.00 | |
| | Creditor's Name | | · · · · · · · · · · · · · · · · · · · | | φ | 0.00 | ☐ Mortgage |
| | Number Street | | | | | | ☐ Car |
| | - Subst | | | | | | Credit card |
| | And the second s | | | | | | Loan repayment |
| | City State ZIP Code | | | | | | Suppliers or vendors |
| | City State ZIP Code | Se de communicación de constitución de constit | | | | | Other |
| | Creditor's Name | | \$ | 0.00 | } | 0.00 | D. |
| | | | | | | | ☐ Mortgage ☐ Car |
| | Number Street | | | | | | Credit card |
| | | | | | | | Loan repayment |
| | | | | | | | |
| | City State ZIP Code | | | | | | |
| | City State ZIP Code | | | | | | Suppliers or ve |

| ebtor 1 | Akilah First Name | Renee | Saunder | ocument | | e 46 of | 56 Case number (# | |
|--------------------------|---|--|--|--|--|--|---|--|
| | | erent rights | Last Name | | | | maniber (if | |
| corpo agent such a | rations of whic , including one as child suppor | h vou are an of | ficer, director, pei you operate as a | rean in control | iy general | paπners; μ | partnerships of | one who was an insider? which you are a general partner; oting securities; and any managing ts for domestic support obligations, |
| | | | | Dates of payment | Total paid | amount | Amount you | still Reason for this payment |
| În | osider's Name | | | | \$ | 0.00 | \$0. | <u>oo</u> |
| N | umber Street | | | | - | | | |
| Či | ty | Sta | ite ZIP Code | • | | | | |
| Ins | sider's Name | The state of the s | | and all the first parameters of the major and give you are segment. | \$ | 0.00 | \$0.C | 00 |
| Nu | imber Street | | <u> </u> | | | | | |
| City | y | Stat | e ZIP Code | | | | | |
| clude _l | l year before y ler? payments on d | you filed for ba | nkruptcy, did yo | ou make any p an insider. | payments (| or transfe | r any property | on account of a debt that benefited |
| Í No I Yes. | List all payme | nts that benefite | ed an insider | | | | | |
| | | | | Dates of payment | Total ai paid | BANK BANK BANK N | Amount you still owe | Reason for this payment Include creditor's name |
| Insid | ler's Name | | | | \$ | 0.00 | 0.00 | |
| Num | ber Street | | *************************************** | | | | | |
| City | | State | ZiP Code | | | | | |
| Inside | er's Name | | an and a first of the consequence of a subject to the description of t | a magangan sa maga magangan kabalaganya sakalawi a magangan kabalawi a magangan kabalawi a magangan kabalawi a | \$ | 0.00 \$ | 0.00 | |
| Numb | er Street | ···· | | | | | | |
| | | | | | | | | |
| City | and the state of the sample of the same and | State | ZIP Code | رسي المهاب والمرابعة | No thermore Angelia, and an area of the second | and the second s | epiper - Ne Papining and Phill West represent the particularies, Tree | THE AND AND ASSESSED ASSESSED. |

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8.

Case 16-33046

Saunders Document Page 47 of 56 Akilah Debtor 1 Renee Case number (if kno Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, **I** No Yes. Fill in the details. Nature of the case Court or agency Status of the case Case title Court Name ☐ Pending On appeal Number Street Concluded Case number City ZIP Code Case title_ Court Name Pending On appeal Number Street ☐ Concluded Case number City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name 0.00 Number Street Explain what happened Property was repossessed. ☐ Property was foreclosed. Property was garnished. City State Property was attached, seized, or levied. ZiP Code Describe the property Date Value of the property Creditor's Name 0.00 Number Street Explain what happened Property was repossessed. Property was foreclosed. City Property was garnished. State ZIP Code Property was attached, seized, or levied. Official Form 107

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Doc 1

Case 16-33046

| 11. Within | | Middle Name | Document Saunders Last Name | Case number (# known) | |
|---|---|--------------------------------------|--|--|--------------------------|
| 11. Within | | | | Case Humber (# known) | |
| accou | 90 davs hef | Ora von Alesta | | | |
| | nts or refuse | to make a payn | pankruptcy, did any credit | or, including a bank or financial institution, set | Off any amounts |
| | | | you owed a d | lept? | on any amounts from your |
| ∟ Yes | s. Fill in the de | etails. | | | |
| | | | Paperit 44 | | |
| Credi | itor's Name | | Describe the action | Date s | ection Amount |
| | | | and the second s | Was to | lKen |
| Numb | per Street | | | To when the state of the state | _ |
| | | | | | \$ <u> </u> |
| | | | | | |
| City | ······································ | State ZIP (| Code Last 4 digits of according | | |
| 40 1464 | | | , ordire of acco | ount number: XXXX | |
| 12. Within 1 | year before | you filed for ban | kruptcy, was any of your n | property in the possession of an assignee for the | |
| Ø No | ₁ a court∗apr | cointed receiver | rkruptcy, was any of your p , a custodian, or another of | fficial? | e benefit of |
| Yes | | | | | |
| | | | | | |
| art 5: Li | ist Certain | Gifts and Con | tributions | | |
| | | | | | |
| 3. Within 2 y | ears before | VOII filed for he | den d | | |
| ☑ No | worde | vu med for ban | kruptcy, did you give any g | gifts with a total value of more than \$600 per pe | <u>-</u> |
| Yes. Fi | ill in the date: | s for each gift. | | man and than sout per pe | rson? |
| | are detail | o for each gift. | | | |
| 1400000 | NA PENA PENGENANAN | | | | |
| Gifts v | vith a total valu | le of more than to | 200 | NODINATE OF THE PROPERTY OF TH | |
| Gifts w per pe | vith a total valu rson | ue of more than \$6 | Describe the gifts | Dates volu | Gave Matur |
| Gifts y per pe | vith a total vali ISON | ue of more than \$6 | Describe the gifts | Dates you the gifts | gave Value |
| | | | Describe the gifts | Dates you the gifts | .gave Value |
| | vith a total vali rson Whom You Gave | | Describe the gifts | Dates you the gifts | save Value 0.00 |
| | | | Describe the gifts | Dates you the gifts | _ \$0.00 |
| Person to | | | Describe the gifts | Dates you the gifts | |
| Person to | Whom You Gave | | Describe the gifts | Dates you the gifts | _ \$0.00 |
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| 19. Within | n 10 years bei | fore you filed for | r bankruptcy, did vou transfe | er any property to a self-settled trust or similar device of which s.) | |
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| or hold | in trust for | trol any prop | erty that so | meone else ov | vns? Inclu | ide any proj | perty you bo | rrowed from, ar | 0.04 | | |
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Akilah Debtor 1 Renee Page 53 of 56 Saund Document Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? M No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code State ZIP Code 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Court or agency Nature of the case Status of the Case title Pending On appeal Number Street Concluded Case number City State ZIP Code Give Details About Your Business or Connections to Any Business Part 11: 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Business Name Do not include Social Security number or ITIN. Number Street Name of accountant or bookkeeper Dates business existed City To_ State ZiP Code Describe the nature of the business Employer Identification number Business Name Do not include Social Security number or ITIN. Number Street Name of accountant or bookkeeper Dates business existed City From _____ To ____ State ZIP Code Official Form 107

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Desc Main

Case 16-33046

Doc 1

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Saunde Pocument Page 54 of 56 Renee Debtor 1 Case number (if known) Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. **Business Name** Number Street Name of accountant or bookkeeper Dates business existed City From _____ To ____ State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial ☐ No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City State ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Date 10-14-2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☑ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? O No Yes. Name of person_ Veronica Eason _. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Desc Main

Case 16-33046

Case 16-33046 Doc 1 Filed 10/17/16 Entered 10/17/16 15:01:37 Desc Main Fill in this information to identify your case: 55 of 56 Akilah Debtor 1 Renee Saunders Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois **C** Case number Check if this is an (If known) amended filing Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15 If you are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form. If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Part 1;

List Your Creditors Who Have Secured Claims

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property |
|---|--|----------------------------|
| Creditor's | | as exempt on Schedule C? |
| name: | Surrender the property. | ☑ No |
| Description of property | Retain the property and redeem it. | ☐ Yes |
| securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's name: | ☐ Surrender the property. | |
| Description of | Retain the property and redeem it. | No No |
| property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| | Retain the property and [explain]: | 8 |
| Creditor's name: | ☐ Surrender the property. | ☑ No |
| Description of | Retain the property and redeem it. | |
| property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | ☐ Yes |
| | Retain the property and [explain]: | |
| Creditor's name: | Surrender the property. | The No |
| Description of | Retain the property and redeem it. | ☐ Yes |
| property ecuring debt: | Retain the property and enter into a Reaffirmation Agreement. | i i es |
| | Retain the property and [explain]: | |

Debtor 1

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Part 2:

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

| Lessor's name: First Western Properties | Will the lease be assumed? |
|---|--|
| | The No |
| _essor's name: | ₩ No |
| Description of leased property: | Yes |
| essor's name; | ™ No |
| escription of leased roperty: | □ Yes |
| essor's name: | ₽ No |
| escription of leased operty: | Yes |
| essor's name: | No |
| escription of leased operty: | The second of th |
| ssor's name; | Y No |
| scription of leased sperty: | Yes |
| ssor's name: | ₩ No |
| scription of leased perty: | Yes |
| | |
| : Sign Below | |
| er penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease. | operty of my estate that secures a debt and any |
| ature of Debtor 1 | |
| Signature of Debtor 2 | |